## NO2 COOOC 3299

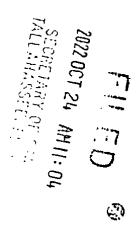
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
tified Copies Certificates of Status				
pecial Instructions to Filing Officer:				
J. HORNE JAN 2 4 2023				

Office Use Only



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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Rainey Lake Homeowners Association Name of Corporation	Inc.
DOCUMENT NUMBER: N02000003299	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Nancy Turner	
Name of Contact Person	
Rainey Lake Homeowners Association, Inc	
Firm/Company	
974 Rainey Run	
Address	
Monticello, FL 32344	
City/State and Zip Code	
wnbturner@comcast.net	
E-mail address: (to be used for future annua	I report notification)
For further information concerning this matter, p	please call:
Nancy Turner	at (253 )380-7323  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of <mark>Florida</mark> red agent, or both, in the State of Florida.	
1. The name of t	he corporation: Rainey Lake Homeowners	Association, Inc.	
2. The principal	office address: 974 Rainey Run, Monticello	, FL 32344	
3. The mailing a	ddress (if different): Same		
4. Date of incorp	poration/qualification: 5/02/2002	Document number: N02000003299	
	I street address of the current registered ag tment of State: (If resigned, enter resigned		
	Resigned		
	Former agent was Gail Friedrich, 953 Rainey Run, Monticello, FL 32344		
		0220	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		
	Nancy Turner  974 Raincy Run, Monticello, FL 32344		
	974 Rainey Run, Monticello, FL 32344		
	P.O. Box	NOT acceptable	
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its registered agent,	
Such change was anthorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.			
~ 5/X (	4	Wallace Turner, President	
-	of an officer or director	Printed or typed name and title	
l furthér agrée ( of my duties, an document is bei	the appointment as registered agent and comply with the provisions of all state of all state of a land accept the obling filed merely to reflect a change in the been notified in writing of this change.	tagree to act in this capacity.  Ites relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
Maure	Lisuis)	10/20/2022	
7 8	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Nancy Turner			
Ţ,	yped or Printed Name		

\* \* \* FILING FEE: \$35.00 \* \* \*